

**Adult Enrichment Course Proposal**

**Instructor Information** Jonathan Gerster, Adult Programs Coordinator

Name Date

Address City State & Zip

Work Phone Home Phone Cell Phone E-mail Address Emergency Contact Phone Class Related Blog, Website, Facebook page, etc:

I am fluent in a language other than English:  I am interested in teaching this or another class is this language

# Course Information

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Course Title | # of Sessions | Day(s) of Week | Set-up Time | Class Start & End Time | Clean-up Time | Type of  Room Needed | Start Date | End Date | Skip Dates |
|  |  |  |  |  |  |  |  |  |  |

**Course Description:** Complete description as you wish it to appear in the Community Education brochure. If participants are expected to bring anything to the class, wear special clothing or if there is a supply fee please indicate that information as well. (Descriptions may be edited for space or content.)

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Instructor Bio: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Class Maximum \_\_\_\_\_\_\_Class Minimum\_\_\_\_\_\_\_ Instructor Compensation: In Kind  Per Student\_\_\_\_\_\_\_\_ Instructor Percent of Revenue: 60%

# Facilities, Supplies and Equipment

Technology or audio visual equipment (limited availability):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Facility needs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Facility/Equipment requests: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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